30 July 1975

MEMORANDUM FOR: Medical Systems Development Officer,
Office of Medical Services

SUBJECT : MEDSIGN Phase I

In response to your request for a memorandum on MEDSIGN to be included in the MEDSIGN Phase I evaluation, the following is submitted.

Originally MEDSIGN developed in response to the DDS plans for a computer based support information processing system (SIPS). OMS was to make available in the Manpower Control System of the Human Resource System of SIPS nonsensitive medical administration information on the status of officially requested medical evaluations to assist the Agency in monitoring case processing of applicants, employees and dependents. In order to derive some benefit to OMS, the office designed MEDSIGN to possess additional detailed administrative medical case processing information that would provide OMS with an enhanced capability to monitor medical case processing.

In December of 1973 the concept of SIPS was modified to Management Assistance Programs (MAP). MAP was to take small modules of the individual DDA office SIPS projects that could be accomplished with a limited effort over a short period and which would provide

immediate benefit for each respective office. In accordance with this new DDA policy, OJCS reviewed with OMS the earlier MEDSIGN concepts and documents and out of this study resulted the MEDSIGN Project Proposal dated 15 April 1974 which OJCS and OMS agreed would form the basis for the start toward development and implementation of Phase I of MEDSIGN.

The MSDO has since that time kept me informed of the status of MEDSIGN Phase I development. The MSDO advised the DD/MS and myself in March 1975 that Phase I had been officially agreed to have been completed on 13 March 1975. In the latter half of March 1975 the MSDO presented copies of the nine routine reports and three of the ad hoc reports that MEDSIGN Phase I could and was producing and provided a detailed description of the contents of these reports. Then on 7 April 1975 as the staff knows the MSDO presented a status report on MEDSIGN Phase I at the weekly OMS staff meeting.

In reviewing the MEDSIGN Phase I reports, it seems clear the documents contain the types of information that were anticipated at the onset of the project in April of 1974. In reviewing the reports designated as Management Reports (Event Duration Report),

Activity Summary Report and Assignability Report) and those specified as Operational Control Reports (Individual Status Report, Individual Event Duration Report, List of New Events Report, and the Events Thirty Days or More Old Report), they seem to possess the types of information that it was felt would be helpful in enhancing our control of case processing and which would provide an augmented method to measure the efficiency of medical processing and to measure the effects of any corrective actions instituted to improve our efficiency.

Because of my retirement, I have not and will not have an opportunity to evaluate any realized or unrealized benefit of the MEDSIGN system, but this should develop out of the current evaluation of MEDSIGN Phase I. I feel confident the findings of the evaluation and Staff Review as outlined in the MEDSIGN Phase I Evaluation Plan will provide a sound base upon which STATINTL may make decisions concerning any STATINTL future course for MEDSIGN.

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Director of Medical Services